

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Handwritten initials]</i>		<i>2/22/01</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>4-18-01</i>
FORMALITY REVIEW	<i>91</i>	<i>905</i>	<i>7/25/01</i>
RESPONSE FORMALITY REVIEW	<i>R.B.</i>	<i>1076</i>	<i>06/12/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	3/28/04
2	3/28/04
3	3/28/04
4	3/28/04
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Claim	Date
Final	
Original	
51	3/28/04
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Claim	Date
Final	
Original	
101	3/28/04
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150	3/28/04

If more than 150 claims or 10 actions  
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